#### FEC FORM 3X

2016-12-07-08-00122580

FE6AN026

### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED ... Office USE ON FRIER

1. [	COMMITTEE (in full)	TIPE OR PRINT	over the line	es.	12FE4M5	-7 AMII: 51
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D	Check if different than previously reported. (ACC)	Sulliver.			Ma 20	9,1,0 -
2.	FEC IDENTIFICATION N	JMBER ▼	CITY A	· •	STATE A	ZIP CODE A
į	C 0,0,4,2,6,1,	2.2	3. IS THIS REPORT	NEW (N) OR	AMENDE (A)	D ·
	TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8	Year Only)
(	(a) Quarterly Reports:	Due on.	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (MS	Year Only)
	April 15 Quarterly Report (C	Q1) (c) 12-Day	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M1 General (12G)	0) Jan 31 (YE)  Runoff (12R)
·.	July 15 Quarterly Report (C	PRE-Electic	on goog	tion (12C)	Special (12S)	Second .
	Quarterly Report (0			, 6.6	<b>7 - 7 - 7 - 7</b>	in the
	Year-End Report (\) July 31 Mid-Year Report (Non-electic Year Only) (MY)	(d) 30-Day	Election on tion General	(30G)	Runoff (30R)	State of Special (30S)
	Termination Report (TER)		the: Election on	\\ \( \mathcal{O} \) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	2016	in the State of $\mathcal{M}, \mathcal{D}$
5. (	Covering Period	0 1 20 1 20	OJE throu	ugh /	1 28 12	0.7.6
I cert	tify that I have examined the	nis Report and to the b	est of my knowledge	and belief it is tru	e, correct and comp	olete.
Туре	or Print Name of Treasure	or THOMAS	A Gen	he.	<del></del>	
Signa	ature of Treasurer	Thur	a-Dente		Pate 12	02 2016
NOTE	E: Submission of false, erron	neous, or incomplete info	mation may subject the	e person signing th	nis Report to the pen	alties of 2 U.S.C. §437g.
L	Office Use Only			ę	FE	EC FORM 3X Rev. 12/2004

# 2016-12-07-03-00122581

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)		Page 2
Write or Type Committee Name  EMPOWERING	EACH COMMUNITY	PAC
Report Covering the Period: From:	0 20 20/6 To	: 11/28/2016
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand  January 1,  ZO16		2471825
(b) Cash on Hand at Beginning of Reporting Period	3,9,7,3,3,1	
(c) Total Receipts (from Line 19)	257000	50700 5000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	29.67331	5.418.25
7. Total Disbursements (from Line 31)	1030926	5605420 1000 1000 1000 1000 1000 1000 1000 10
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1936405	1936405
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	an energy consequency of the second in the s	
This committee has qualified as a multic	candidate committee. (see FEC FORM 1M)	

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

## 2016:12 07 - 03 - 00122582

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ....... ▶

#### **DETAILED SUMMARY PAGE**

of Receipts Page 3 FEC Form 3X (Rev. 06/2004) Write or Type Committee Name EMPOWERING EACH COMMUNITY PAC Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Uniternized ..... (iii) TOTAL (add Lines 11(a)(i) and (ii)...... (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received ..... 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 2570000 50 70000 12, 13, 14, 15, 16, 17, and 18(c)).......

2510000

507000

#### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003) **COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share ..... (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures ..... (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ...........................▶ 22. Transfers to Affiliated/Other Party Committees..... Contributions to Federal Candidates/Committees and Other Political Committees... 24. Independent Expenditures 26. Loan Repayments Made..... Loans Made......

 Refunds of Contributions To:
 (a) Individuals/Persons Other Than Political Committees ...... (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).......... ▶ 00000 29. Other Disbursements ..... 30. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share ..... (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds ..... (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b))....▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 56.05420

#### **DETAILED SUMMARY PAGE**

of Disbursements

	FEC Form 3X (Rev. 02/2003)	or dispursements	Page 5
111	. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	2570000	5070000
34.	Total Contribution Refunds (from Line 28(d))	0	0
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	25,70000	5020000
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2655926	3668420
<b>37</b> .	Offsets to Operating Expenditures (from Line 15, page 3)		0
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	655926	3668420

C	CHEDULE A (FEC Form 3X)	i		FOR LINE WILLIAMS TO THE STATE OF THE STATE
	•		Use separate schedule(s)	FOR LINE NUMBER: PAGE OF 4 (check only one)
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	V 11a 11b 11c 12
				13 14 15 16 17
Ai or	ny information copied from such Reports and Sta- for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			y One
	EMPOWERING	E'A	CH COMMONI	79 PAC
A.	Full Name (Last, First, Middle Initial) HECKLER ALEXAN	oer	ρ	Date of Receipt
	Mailing Address 436 W. 51st S City MIAMI BEACH	Street	-	10 24 2016
	MIAMI BEACH	المالة	Zip Code 33/40	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	and the second s	300000
	Name of Employer LSN PARTNERS	Occupation AHO	RNEY	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	Traces variables	300000	
_	Full Name (Last, First, Middle Initial)		<del></del>	<del></del>
В.	STIEFEL BARBA	RA	A	Date of Receipt
	Mailing Address 700 CORAL WAY	#3		10 24 2016
	700 CORAL WAY City CORAL GABLES		Zip Code 33134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	acher un du march march properties and march march	250000
	Name of Employer  NONE	Occupation Phili	anthro Pist	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		2,500,00	
_	Full Name (Last, First, Middle Initial)			
C.	AUGUSTIN GENE Mailing Address	•	<u></u>	Date of Receipt
	8260 NE 28 A	ve.		10 24 2016
	MIAMI FL		Zip Code 33138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	ool an ang ponasagnan ay nasangnan ang nasang	20000
	Name of Employer  GMhetc, INC.	Occupation I.T	_	
	Receipt For:		Year-to-Date ▼	
	Primary		2000	
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8	SUBTOTAL of Receipts This Page (optional)	•		5,70,000

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	NAME OF COMMITTEE (In Full)  EMPOWERING EACH C	~ 1 M M	unity PAC	·
۷.,	Full Name (Last, First, Middle Initial)	,011/110	DIVITE THE	<del></del>
A.	JEAN ALAIN			Date of Receipt
	Mailing Address 401 E. LAS OLA	Ctoto	7in Code	10/24/2016
	FT. LAUDERDATE	FLORI	DA 33301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	หญะบาลง รูวบางเรียบกระบุละคนรู้ ครองกฎครองกุละคน	200000
	THE AUGUST COMPANY	Occupation	NSUltant	
	Primary General Other (specify) ▼	dinoral mandam	Year-to-Date ▼ 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) EXUME, REMOT	ND	•	Date of Receipt
	Mailing Address 1998 NE 176th Street  City NORTH MIAMI BEACH, Florida 33162			10 24 2016
	NORTH MIAMI BEACH,	State Flore	0A 3316Z	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	กรรุ้งกระกรรฐก ขางสรุกของกระที่จะการเพื่อเลขายรัฐเลขายระ	50000
	NONE	Occupation	PetineD	
	Primary General Other (specify)	dannos Horas o dosas	Year-to-Date V	
<u> </u>	Full Name (Last, First, Middle Initial)  MAIGNAN  Tean	NP	ATRICK	Date of Receipt
	Mailing Address SIO N.E. 167th	Stre	eet .	
SIO NE 167th STRE  City  MIAMI, FLORIDA  State				Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	แล้วการเกลือนการที่สาราสที่สาราสที่สาราสที่สาราสที่สาราสที่สาราสที่สาราสที่สาราสที่สาราสที่สาราสที่สาราสที่สา	5000
	Name of Employer  NO NE	Occupation R	etirel	
	Receipt For: Primary General		Year-to-Date ▼	
_	Other (specify) ▼		500°	
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T	OTAL This Périod (last page this line number on	ly)	<b>&gt;</b>	

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 3 OF 4 (check only one)  11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any peaddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  EMPOWERING E	ACH COMMUNITY	1 PAC
Receipt For: Aggregate	Zip Code 45042	Date of Receipt  1.1 0.3 20,16  Amount of Each Receipt this Period  1.000.00
FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Aggregate	Zip Code 33/56	Date of Receipt  10 24 20,16  Amount of Each. Receipt this Period  100000

Hightower Hetroleums Receipt For:	C.E.O.	
Receipt For:  Primary General	, 133, 53 10 1	
Other (specify)	100000	
Full Name (Last, First, Middle Initial)  ZIENTZ MARK  Mailing Address  9136 DADELANI  City  MIAMI FL  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPloyed  Receipt For:  Primary General  Other (specify)		Date of Receipt  1.0 24 2016  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  RAMKHELAWAN  Mailing Address  7320 ORLEAN  City	s Street	Date of Receipt
City HOLLYWOOD. FEC ID number of contributing federal political committee.  Name of Employer Self Employer Receipt For: Primary General Other (specify)	C 33023  C Occupation PHYSICIAN  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4 OF 4 (check only one)  11a
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Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  B. Piere, LAURINUS	100000	Date of Receipt
S 2 60 NE 2d Ave  State  MIAMI F LORIVA  FEC ID number of contributing federal political committee.  Name of Employer  PHYSICIAN  CN	HETC, INC Year-to-Date ▼	Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)	Zip Code  Year-to-Date ▼	Amount of Each Receipt this Period
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A.	DELOITE POLITICAL	Action	N Commillee	Date of Receipt						
	Mailing Address P. O. BOX 3	365		10/24/2016						
	City:	State	Zip Code							
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ITEMIZED DISBURSEMENTS    Use separate schedule(s) (checking for each category of the	LINE NUMBER: PAGE   OF / kyonly one)   21b
Detailed Summary Page	27 28a 28b 28c 29 30
Any Information copied from such Reports and Statements may not be sold or used by any or for commercial purposes, other than using the name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
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V EMPOWERING EARH COMMUNITY	PAC
Full Name (Last, First, Middle Initial)  A.	Date of Disbursement
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Mailing Address 509 Mc CORMICK DRIVE	1.1 0.8 20.16
City Glen BURNIE Md. 21061	·
Purpose of Disbursement	
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Office Sought: House Disbursement For	4 4.75.00
Office Sought: House Disbursement For: Senate Primary General	
President Other (specify) ▼ State: District:	
Full Name (Last, First, Middle Initial)	<del></del>
B. <u>CAMPAIGN</u> FINANCE CONSULTANT	Date of Disbursement
Mailing Address	11 02 2016
OITY WASHINGTON, D.C. 20002	
Purpose of Dishursement	
CONSUMNO FRES	Amount of Each Disbursement this Period
Candidate Name Categor	208426
Office Sought: House Disbursement For:	
Senate Primary General  President Other (specify) ▼	
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Full Name (Last, First, Middle Initial) C.	Date of District
	Date of Disbursement
Mailing Address	
City State Zip Code	
Purpose of Disbursement	
Candidate Name	Amount of Each Disbursement this Period
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President Other (specify) ▼	
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	NAME OF COMMITTEE (IN FUIL)  EMPOWERING EACH										
	Full Name (Last, First, Middle Initial)					Date o	f Dis	burse	ment		
A.	APPLEGATE FOR CO	ONGRESS			r	H T H	ק. קי	3	श्र	7.7.	77
	Malling Address 977A LOMAS SA1	UTA FE DRIVE			<u> </u>	1.0	<u></u>	0			<u>, , , , , , , , , , , , , , , , , , , </u>
	Malling Address  977A LOMAS SAT  City  Soland Beach, Car  Purpose of Dispursement	State Zip Code 92075								٠	
	Purpose of Disbursement  CONTRIBUTION		0.1	1		\moun	nt of	Each	Disburse	ment th	is Period
	Candidate Name		Cateo				<del></del>	<b>.</b>	1.3	250	000
	Office Sought: House Disburser	ment For:	1 91	<del></del>	-┤ ╹		-				
	Senate President	Primary General  Other (specify) ▼									
	State: CA District: 49th	Children (Charles)				·					
P	Full Name (Last, First, Middle Initial)	•			,	Date o	of Dis	sburse	ment		
В.	FRIENDS OF ANG	elA AISO BRO	OK.	<u>S</u>	_	777	. J.:	-20,00		<u> </u>	777
	Mailing Address P.O. BOX 60					1	_	1	0	20	1 6
	City UPPER MARIBARO Md. 20792						<del></del> .	·	<del></del>		·
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,	State: President District:	Other (specify) ▼						<u>.</u>			
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#### SCHEDULE B (FEC Form 3X) **PAGE** OF FOR LINE NUMBER: Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 26 21b 22 23 Detailed Summary Page 30b 28a 286 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) EMPOWERING EACH COMMUNITY Full Name (Last, First, Middle Initial) Date of Disbursement THE HENRIEHA LACKS LEGACY GROUP ZIp Code City TURNER STATION 21222 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate General Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) В. Date of Disbursement Mailing Address City Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate General Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)..... 00000

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